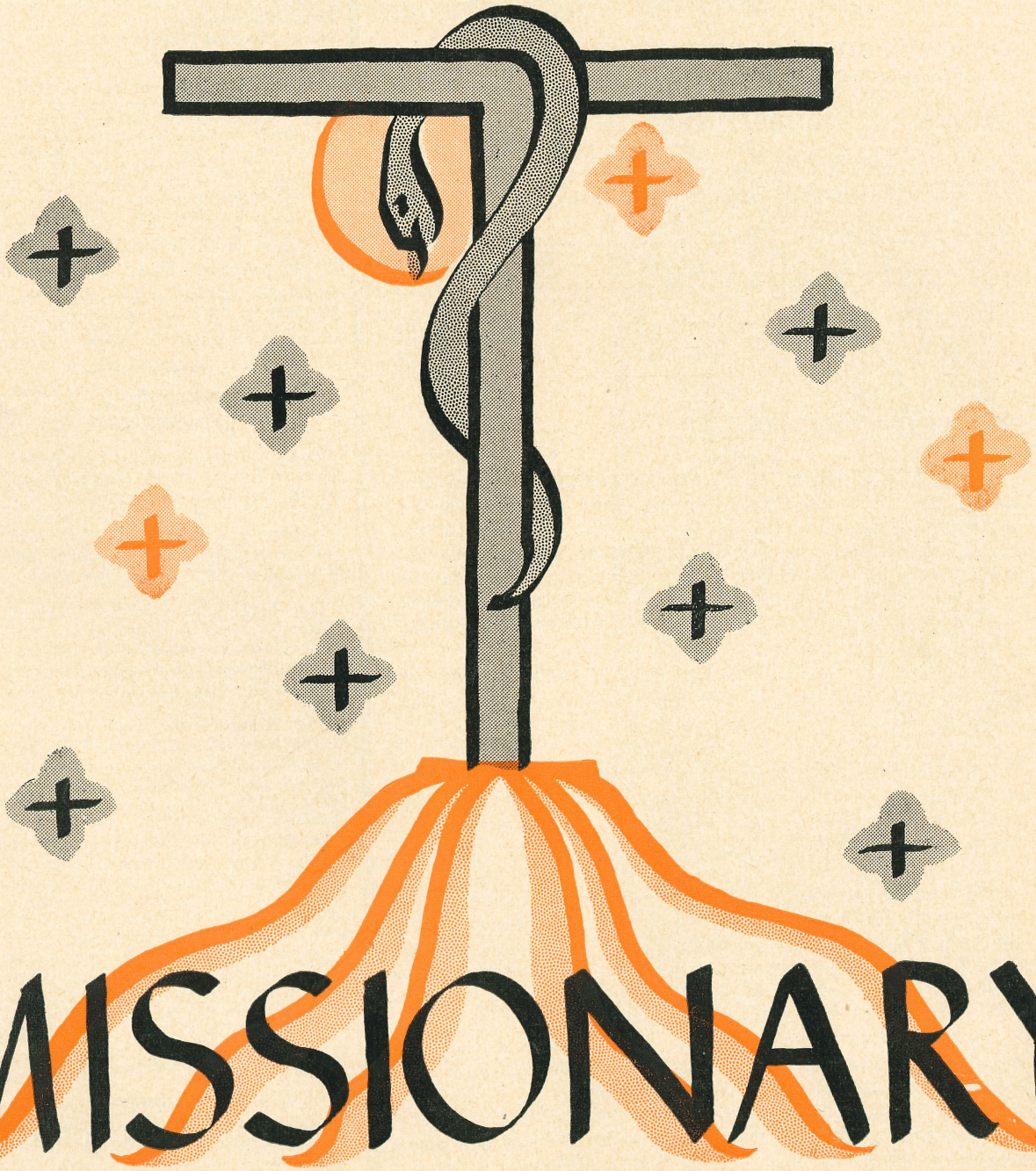
The MEDICAL MISSIONARY



VOL. XVI OCTOBER, 1942 NO. 8

IN THIS ISSUE:

Page

THAT ALL MAY BE LEAVENED 115

WOMEN IN MEDICINE
By a Medical Missionary 116

A CHAT ABOUT "CHITS"
By Sister M. Alma Lalinsky, S.C.M.M., M.D. 118

MYSORE
By Sister M. Ann, S.C.M.M., Ph.G. 120

OCTOBER MISSION INTENTION
By The Rev. Lourdu M. Yeddanapalli, S.J. 121

WHAT—NO TIGERS?
By Sister M. Elise Wijnen, S.C.M.M., M.D. 122

IN OUR LIBRARY 124

THE MISSION CLIPPER 125

JOTTINGS FROM ABROAD 126

AUTUMN ..... See Back Cover!

ACROSS THE PAGES . . .

FATHER LOURDU M. YEDDANAPALLI, S.J.—himself a native son of India—writes from first-hand experience as he urges us to pray and sacrifice to "promote the work of St. Peter for the formation of native clergy." Father Yeddanapalli has studied both in India and in Europe. During the past year he attended Princeton University, where he specialized in physical chemistry. At present he is staying at Auriesville, New York.

"A 'CHITTI' (NOTE) FOR EVERY OCCASION"—seems to be a by-word in India. And Sister Alma Lalinsky, M.D. has had plenty of experience in writing and receiving them!

THERE HAVE BEEN WOMEN DOCTORS in all ages and in all epochs. The important part women have played in the advancement of medical science is briefly recalled in "Women in Medicine."

"COMING TO INDIA is like starting life all over again"—so writes Sister Elise Wijnen, M.D. Even the animals are different. And though you may not encounter any Bengal tigers, there are ever so many other four-legged "friends" you simply must get acquainted with!

SISTER ANN enjoyed her trip to Mysore so much that she decided to share it with us. You will not want to miss the details in her article—"Mysore."

A FAMILY SPIRIT is what we need to build our new hospital in Pindi. We urge you to join us please—in a "family spirit with Christ!"

THE MEDICAL MISSIONARY

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SISTER M. LOYOLA, S.C.M.M.
Editor

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The Motherhouse and Novitiate are located in Fox Chase, Philadelphia, Pa. There is also a House of studies in Brookland, Washington, D. C., and Houses of Postulate in England and Holland.

At present the Society labors in India, where the Sisters conduct Hospitals, dispensaries, maternity, and child welfare centers, training schools for native nurses and midwives, and similar health activities. It is the purpose of the Society to send Medical Missionaries to any mission field of the world. The Society has many requests; it needs many vocations.

For further information apply to:

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MEDICAL MISSION HOUSE
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That All May Be Leavened - - -

This year Mission Sunday coincides with the feast of St. Luke, which gives us a welcome opportunity to bring into relief this great missionary, who is also the patron of the medical profession.

He possessed that useful and desirable attribute of a missionary—versatility. That he was a good and popular physician we know from the remark of St. Paul, who called him—"our most dear physician." As the biographer of the greatest life ever written and the historian of the first era of the Church he ranks among the outstanding writers of the world. From the accounts of his journey and sufferings one cannot doubt that he had tremendous will power and bodily endurance.

His most important asset however, was that his heart and mind were so avid for truth and goodness that he was among the first of the Gentiles to embrace the new doctrine. It leavened his life thoroughly and possessed him to the extent that all legitimate self-interests—his family, country, profession, financial security and comfort—were sacrificed that he might labor to bring this new leaven of Christ to others. Probably it was not without struggle or interior revolution that he took down his shingle (if doctors had shingles in those days) and set out without scrip or purse with St. Paul.

His motive and resolve must have been strong—for he persevered with the indefatigable and uncompromising apostle, reckless with him of hunger and prison—of shipwreck and abuse. Their labors, fastings and sufferings brought results. Generation after generation has been leavened by missionaries who have followed in their footsteps—until now one-third of the human race has been to a greater or less degree penetrated with the life-giving Truth.

The other two-thirds are still dense and lifeless with apathy, superstition and ignorance. To ours and succeeding generations is left the privilege and the responsibility to make this mass porous with charity and to raise it to its destiny—to know, love and serve the true God and be happy with Him for all eternity.

To achieve this more and more effectively, Mission Sunday has been instituted to make every man, woman and child participate in the spread of the Kingdom of God.

While efforts and means of many kinds are needed, barring prayer, none is comparable in necessity or urgency to a legion of missionaries—who, themselves leavened through and through with Christ, will count no cost that others too may rise to a new life in Him.

— A. D.

Women In Medicine

by

A Medical Missionary

When a woman becomes a doctor she is doing one of the most natural things in the world! After all, it is the woman who educates children and watches over their health. It is but logical and consistent with the fundamental principles of Christian charity that women should assist one another, especially at the time of childbirth. Even man himself, when sick or wounded, turns to woman that she may care for him and dress his wounds.

We need not be surprised then, to find women physicians in all epochs and in all countries. Among the primitive peoples of the South Sea Islands and the Indians of North and South America "medicine women" are known to have taken their place along with the "medicine men." In ancient times there were women doctors in Egypt, Greece, Rome and the Germanic countries. To the field of obstetrics—more than to any other—the best of them dedicated their lives.

From its very beginnings Christianity took an affirmative attitude towards the study and practice of medicine by women. This came as a result, not only of the high ideals of Christian charity, but because the Church recognized that the cultural development of woman's mind and heart would be an element of no little importance in raising up her standards, which was precisely what early Christianity wanted to do.

The Doctors of the Church—such as St. Jerome and St. John Chrysostom—wrote in praise of the educated woman. As a fitting rebuff to those who appeared surprised and shocked when he promoted higher education for women, the former dedicated his translation of the Bible to Paula and Eustochium, both of whom we now venerate as saints. This same fiery champion of women's rights does not hesitate to say: "It would take several books in order to write down the histories of the great women of Rome and Greece."

Sometimes we seem to be under the impression that the women of these ancient countries cared for little else but ease and luxury. The truth of the matter is that the interests of a great many of them were far removed from anything that savored of frippery and nonsense. "See how these Christians love one another," was not spoken of the men alone. A relative of St. Paul's, known as St. Zenias, carried on an extensive medical practice among the poor. The patrician lady, Fabiola, after her conversion to Christianity at the age of twenty, devoted herself to a life of medical charity, not only in Rome but also in the Holy Land. She was both a physician and a nurse—and is believed to have practiced surgery too. And we know that Macrina, the sister of St. Basil, worked side by side with her brother in his large hospital at Cappadocia. In fact she had the general oversight of the whole hospital, and of her St. Chrysostom has written, "Macrina was a great organizer, an independent thinker, and as well educated as Basil himself."

It is interesting to learn too, that both St. Augustine and his mother, St. Monica, studied medicine together at their home in Tagaste on the coast of northern Africa. While her son wrote, the mother used to go about among the poor and sick, using her medicines where they were needed and giving comfort to the dying.

With the coming of the Goths however, the Roman scene changed—and as the fourth century merged into the fifth, the conditions of the Empire grew steadily worse. The drains of the city of Rome became clogged; malaria was endemic; the great granary of Rome in North Africa was not producing its quota of food, nor was wheat any longer imported from Britain, Gaul and Spain. The swords and lances of the Roman legions were powerless to stem the onslaught of the new invaders; freebooters and pirates infested the seas. Alaric's hordes spared the Christian population, but damaged their property, especially their works of art and the books which the barbarians could not read. From a homogeneous empire of sixty-four provinces, the Roman world became a heterogeneous mass of uncultured peoples.

Naturally the science of medicine suffered, together with all other forms of culture. Very few women practiced medicine during this period, and even these few seem to be hidden in the darkness that enveloped the world. But men and women must have given help to the lame, the halt and the blind of those days. From the tombstones which are still to be found, it is certain that there existed an anonymous body of women doctors who were buried with honor by their parents, children, husbands and patients. In many cases the word, "medica," is clearly inscribed. That the women were

Service is sacrifice grown into a habit.—T. Gavan Duffy

Christians can be gathered from the symbols of the Cross and the fish, or the words, "in pace," which accompanied the inscriptions.

What civilization would have been like in those troubled times without the saving force of Christianity is difficult to imagine. It kept medicine alive in the fifth century and later on, when science began to emerge from its obscurity, it was promoted by the men and women who had retired to the monasteries to seek peace and respite from the troubles of the age.

In England and Ireland, medical conditions were far better than on the continent. About the year 525 we find St. Bridget working among the poor and sick at Kildare. It was she who convinced the rulers of the country that outright medical quacks should be banished from the Isle. The name of Bridget continued to be greatly revered by all the people, and many another woman followed her example—opening hospitals and practicing medicine.

Although in the sixth century there were almost no women doctors whose names have been preserved, in Constantinople, Germany and France there were queens who studied medicine. One of the most famous was Radegunde, the wife of Clothaire. In her own palace Radegunde assembled the lame, sick and blind beggars of the realm, studied their diseases and prescribed treatment for them. Sometimes the learned men of the court were her teachers and consultants, but soon she herself became very skillful in diagnosis and cured all sorts of ailments. Later on she sold all her jewels and built a large hospital near Poitiers, where she cared for the sick and trained some two hundred other women to follow her example.

Although students of history regard the thirteenth century as the greatest of centuries, it was the eleventh which really gave the fresh impetus to exportation and commerce, and, what is of greater interest to us here, to medicine. The medical colleges of Salerno contributed the most to this revival. Here again we find that women played no small part.

Two famous names have come down to us from this period—those of Trotula and Mercuriade. Both wrote medical books, the latter specializing in surgery. Of the two, Trotula is the more prominent, and many of the remedies she is known to have prescribed have even a "modern ring." Though it was impossible for her to rise far above the general level of the medical knowledge of her times, she did write so practical a treatise on midwifery that for hundreds of years it was copied and referred to as an authority.

The "women of Salerno" as the medical women were called, were quite ingenious in devising various ways and means to make their patients comfortable. They ordered medicated baths and suitable diets. If the houses seemed damp or cold they had a fire kindled. They sprinkled the patients' faces with sweet smelling extracts and advised them to engage in quiet games and occupations while convalescing. Their final salutation was always, "Go in peace; may Christ lead you."

But of all the medical women of the Middle Ages, the most independent and learned by far was the Abbess Hildegard who was the head of a small nunnery on a hilltop overlooking the German Rhine. Although she ruled a community of only about fifty nuns, she dictated to popes, emperors and kings the courses of action they should take. During her life—which spans almost the whole of the eleventh century—she was

(Continued on page 124)

St. Therese of Lisieux—the story's told—
Was very fond of peaches.
In them she saw how WONDERFUL GOD IS—
Who sends His rain and sun
And makes things so that blossoms grow
Into a healthy, juicy fruit
To PLEASE HIM.
St. Therese, teach us
To behave as peaches do—
To use the things God gives us
So that we may grow into the fruit
Which He would have us be—
OTHER CHRISTS—and PLEASE HIM.

A Chat About "Chits"

by

SISTER M. ALMA LALINSKY, S.C.M.M., M.D.

"Chittis" (notes) are very much the "order of the day" in India!

Letters bearing United States postage seem to become less and less frequent nowadays, but such is scarcely the case in regard to the local chittis or chits which besiege one daily. Dispensary patients, in-door patients, relatives of patients and personal servants frequently bring them.

Chits vary considerably in appearance, length and contents. The paper may be blue, pink, mauve or white. Occasionally it is scented—and quite pleasantly too, while a scribbled bit on the margin of a non-too-clean newspaper may serve the purpose. The language is almost always English, as the educated have learned it, and others have easy access to "curb-service" translations in the bazaar. Any "B.A. failed" will gladly translate for a small fee. And what compositions! — anything and everything from Biblical phrases and Shakespearean quotations to American slang is apt to creep into these products of the versatile bazaar pens!

One may receive a few stilted sentences or be faced with a communication of prodigious length. As to contents—the chit is equally variable. It may prove to be a conjecture as to diagnosis, a plea for concessions (the local term for reductions), a veritable litany of suggestions or the condemnation of a line of treatment or method of conducting the hospital, or complaints of discourtesy on the part of some member of the staff or some patient in the ward. One day one may receive a scathing accusation of the corruption and dishonesty of supposedly trustworthy servants (and this is always from the most recently dismissed man), whereas the next may bring a dissertation on the contrast between Our Lord's charity and our lack of it.

Notes of thanks in small numbers also find their way into the hospital. One man wrote: "I shall every day pray God for long life and prosperity to the special trouble you gave for God Sake in sympathy of a poor, helpless, sonless (he had only five daughters) father."

Even our cook does not escape his share of "gali" (abuse). One dissatisfied customer sent the following note: "I dare say that "khansama," who cooks food in the hospital is most inefficient, and he cannot distinguish between "pakka" and "katcha chappati" (baked and half-baked bread). In the presence of this "khansama," I would say, that to take food from your hospital means to purchase a new disease. I have become too weak now and the strength that I gained in the last two years has been lost to a great extent. I cannot say whether I can be recovered from stomach trouble so soon." Contrary to her expectations this lady fully recovered from the dyspepsia she blamed on our cook, and when Christmas came around this "illiterate" lass sent a telegram with this message in English: "A merry Christmas and a Happy New Year!"

Practically three-fourths of the chittis received present an explanation of the various symptoms of the patients. The relatives think that the patients will get stage-fright (which they often do), and forget to mention each of their numerous complaints, or that we foreigners will not be able to understand the language. The writers of chits sometimes pride themselves on their ability at diagnosis and display that tendency by dropping hints to that effect. A few typical examples of "fan mail" are given below:

Madam:

I most humbly and respectfully beg to state a few lines for a favorable consideration.

About three or four months ago my daughter got some cold and the nerves also rendered weak and good-for-nothing. Now at the lower part of the neck a cluster of swelling has appeared there by which the circulation of the blood is quite stopped. By this effect something goes up to the throat, neck and head, making there a swelling, which gives a great trouble to my daughter.

Hoping you would kindly investigate into this humble request which I have explained above, and I would pray for long life and prosperity if you would cure for the circulation of the blood. Thanking you in anticipation, I am, Madam,

Your most obedient servant,

It is not community of race, of class or nation; it is the love of charity that makes us what we ought to be, members of the family of God, of the only community where each person, drawn out from his fundamental loneliness, truly communicates with others and truly makes them his brothers, by giving himself to them, and in a certain sense dying for them.—Jacques Maritain in "Ransoming the Time."

Respected sir:

This patient, Amina Begum, has been keeping low temperature. The bones of the face now appear to be more pronounced with thinning of the flesh. Complexion growing pale and insipid. A thorough examination solicited.

Yours faithfully,

Respected Madam:

I beg apologes to waste some of your precious time. The patient, Lajawanti, has been re-attacked by fever. I think the fever is malaria, for it went too high with cold last day. Please do take care to the fact. Thanks.

Yours faithfully,

Sometimes "special considerations" are solicited, as in the following:

To the Head-Doctress
Holy Family Hospital
Reference H.F.H. Ticket No. 2345

Good Morning! I learn from my wife that you are treating her case with the rest, which I do not expect from you because, firstly I am your permanent case since 1939 and as well since then have advised and sent several cases to the hospital and do as well always look to the hospital's benefit. So I may have the honor to request your goodself to kindly have special regards and treatment and advise her in everything in detail.

Thanking you in anticipation I await favorable consideration for the boon solicited.

Your faithfully,

Not so very long ago a distressed husband sent us an urgent appeal:

The Head Lady Doctor in Charge
Respected Request:

I am a helpless young man, because my private house circumstances are bad. No one without I will attend my wife. I know fully that without I my wife will not recover. Because hysteria is a nervous trouble, therefore, in my opinion, main cause of her illness is my absence. If I am sent out of station again she will die. Therefore kindly send recommendation as soon as possible.

Your obedient servant,

Nor is one always on the receiving line for these chits. In fact, it is necessary to write almost as many as one receives. The patients' husbands want chits for leave of absence from work. His wife's sojourn in the hospital is a very good excuse for a man to arrange for a week's holiday. "For," says he, "the women relatives are of no use. I have no other responsible male member in my family to look after her. Therefore, I myself must be here to see that she has all she wants."

Patients require chits for the purchase of special injections from the bazaar. They must be given a chit with the exact time of the baby's arrival, chits to explain their absence from court proceedings, chits to their employers, recommending transfer to more suitable climates. Whenever a servant leaves, he too, must have a chit. After numerous demands a certain employer presented his departing servant with this note: "During his month's employ in my service, Sita, sweeper, has conducted himself entirely to his own satisfaction." The contents did not bother Sita much. The chit itself, rather than the contents, seems to produce a general bolstering of morale and transforms an otherwise timid soul into an intrepid mortal who blithely approaches any barrier.

I half expect someone to come up to me any one of these days and say: "Look here, my old mother-in-law is dying; please give her a chit to Saint Peter so that she may be given a good place in heaven!"

"What a nice, shiny plaything you have, Dr. Sahib!"—Sam Babu thinks Sister Alma's stethescope would make a pretty good toy.

MYSORE

by

SISTER M. ANN, S.C.M.M., PH.G.

Last year when I was sent from Rawalpindi to Patna, a journey of over a thousand miles, I found, as was to be expected, a great difference in peoples, customs and scenery—from endless tracks of desert-like scrub in the Punjab to the verdant lands along the Ganges. Then, a few months ago I came down south, this time over one thousand, five hundred miles to an entirely different type of country and peoples, where the Telegu, Tamil and Karanese tongues replace the familiar Urdu and Hindi. The scenery is more tropical; the people are darker in color, shorter in stature—yet of much better physique than the poor Biharis.

Tropical and semi-tropical flowers bloom freely all the year round. Fruits and vegetables are plentiful, and they tell me that for nine months of the year the grass is restfully, refreshingly green.

Mysore city itself is a regular garden city, with numerous parks and squares, in which are many fountains and a great variety of flowers, trees and shrubs. It must be one of the cleanest cities of India. Its roads—the most recently constructed are over one hundred feet wide — are bordered by shade-giving trees. There are wide pavements, and no street cars, car lines, posts or wires deface Mysore's broad thoroughfares.

A Hindu Temple

The great national hero, Rama, is believed to have shed radiance on many places in Mysore State, while his wife, Sita, during her banishment, is said to have given birth to twins in the district. Here also King Asoka sent a mission to propagate the faith of Gautama Buddha.

Tippu Sultan, who became famous through his infamous deeds, callously destroyed almost all the earlier records which had been laboriously collected. Sometime after his defeat, a British Commission was appointed to administer the State. This Commission, however, restored Mysore to its rightful rulers in 1881, and since then the reputation of the State has come into pre-eminence as a model of enlightened and progressive administration.

Just within the toll gates on the eastern side of the town are a group of stones of two kinds, virakals and masticals — all of them elaborately carved. The former speak of men's courage in the heat of battle, while the latter more poignantly commemorate the desperate courage of frail women who followed their men to death in the last great sacrifice and gave their bodies to be burned on their husbands' funeral pyres.

At night the city seems to be a veritable fairyland. The palaces, and there are many, the public offices of the State, and many other buildings are illuminated with thousands of electric lights of all colors. Dominating all are the lights on the temples, shrines and summer palace of the Maharajah on the summit of Chamundi Hill.

Chamundi Hill, named after the Goddess Chamundi or Kali, is an isolated rocky hill, nearly 4,000 feet high, with precipitous sides, to which Mysore owes much of its

(Continued on the next page)

OCTOBER MISSION INTENTION

by

The Rev. Lourdu M. Yeddanapalli, S.J.

To the life and growth of the Catholic Church her priesthood is what the life blood is to a living organism. The Church can thrive like a healthy organism living on its own wholesome blood only when she possesses a priesthood drawn from the sons of the land in which she finds herself. In the countries of Europe and America she enjoys this happy independent state.

But in the mission countries of Africa and Asia the Catholic Church lives, as it were, by a transfusion of blood supplied to her by her generous sons from the Christian West. These still form, except in some rare cases, the bulk of her priests in the missions. She can, therefore, feel no more secure and work no more efficiently than can a person living largely on the blood of generous donors. Not that the donors have ever been or will ever be wanting, for it is the peculiar glory and privilege of the chivalrous Christians of the West that they have always been giving of their best in order to bring Christ to the millions in the missions. But they are so often thwarted in their noble endeavor by external circumstances. Think of what happened to the missionaries in World War I. And now we have another war raging literally in every part of the globe. For the Church in the missions it spells spiritual blockade and consequent starvation—no more material aid—no more missionaries from the West. Those on the spot are either forcibly repatriated, as we saw on our very shores last August, or practically prevented from exercising their functions because they happen to be of the so-called enemy nationality. The disaster to the Church is evident but would have been spared her, had she had a strong native clergy.

Even in normal times she wants to have a native clergy wherever she is, because she can thus carry on her work more efficiently. She is persuaded that in order to communicate to others her message of Christ with a sympathetic understanding and a strong human appeal her priests must know thoroughly their peculiar mentality. This supposes a good command of the language and a proper appreciation of the manners, customs and habits of thought and of the religious belief of the people in question. That this is not easy anyone will admit who has lived in a foreign country. For a native, however, the difficulty scarcely exists. Clearly, a good native clergy is what the Church is anxious to have in the missions.

Finally, it is of the very nature of the Catholic Church that she feel at home wherever she is, for she is the common mother of all peoples, irrespective of their country or race. Her message is always the same and her solicitude and devotion to all is equally maternal. But she adapts her approach, even her demeanor, to suit the peculiarity of the people she is dealing with, lest anyone possibly mistake her for a foreign intruder. She believes that she can best achieve this with the help of a native clergy.

It is for all these reasons that the Sovereign Pontiffs have been making such continued efforts to build up a native clergy in the mission countries. For these reasons too, the missionaries have been repeating their incessant demands for help to form more and more native priests. The Holy Father is inviting us once more during the month of October to do our best to promote the work of St. Peter for the formation of native clergy, to further it with our prayers, sacrifices and material contributions—unstintingly, in "full measure, pressed down and flowing over." It is a Mother's wish that we are asked to make good!

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loveliness. It is cloud-capped at dawn, rose-tinted at sunset, and star-spangled through the night. Rumor has it that one of the court-ministers of the late Maharajah drew His Highness's attention to its resemblance to a crocodile. He was struck by the likeness and to emphasize it, outlined the crocodile—head back, upper and lower limbs and eyes—with hundreds of high-power electric bulbs, which are visible for a great distance from sunset to sunrise. The numerous shrines and temples draw multitudes to worship and many more to enjoy the cool, fresh air and beautiful gardens, which lend beauty to its hill-sides.

The palaces would require a separate article to do them justice. The Royal Palace is of massive grey granite of Indo-Saracenic design. Scenes from Hindo mythology are exquisitely carved all over it. Domes, floors, columns, balustrades are of the most beautiful minerals — granite, colored marbles, porphyry and serpentine. The whole interior, especially the durbar hall, is said to have all the glamor and glory of the "thousand and one nights."

St. Philomena's Shrine, so famous throughout India, was not forgotten. We had to thank her for keeping us in many a necessity and to beg her assistance in the future. And it was there also that we ended a short but delightful visit to Mysore City.

What --- No Tigers?

by

SISTER M. ELISE WIJNEN, S.C.M.M., M.D.

Adaption means getting adjusted to many things—animals included!

Coming to India is like starting life all over again. Previous notions and ideas must be chucked overboard and many concepts dislodged if you want to live and learn here. The way to be happy is to be unprejudiced. Every time you find yourself deciding beforehand that a thing ought to be such and such, look again. Perhaps you are right; but then again, perhaps you are not. This is India. Things may be different from home, and yet good and useful. Climate, scenery, customs, living conditions, that Mohammedan woman's "burkah," and that clumsy red earthenware "serai," (waterpot)—they all have a reason, or they would not be there. It is up to you to find out the "whys." The scholars have a name for it; they call it adaptation.

It is a queer thing, that adjustment. At first you think that you will never get used to those ugly black buffaloes, just one size smaller than a hippopotamus, waddling down the narrow bazaar streets demanding the right of way. But then you discover that there is very little pasture land in this district, so the cattle have to make their living as best they can, grazing along the wayside and traveling from one plot to another. A little later you do not even see them any more, unless they happen to barge into your bicycle or "tonga." You become quite adept at ducking them, and that is that. One hurdle passed. You have become adjusted to buffaloes—which means you are getting on!

Camels are a bit different. They are rarely in the way, for most of them are army property, and the sepoys keep them well in hand and off the main thoroughfare. In fact, they look rather picturesque especially from a distance, trudging down in single file from the hills, tails-tied-to-muzzles, bells jingling, heads high up in the air, mumbling on their thick lower lips. The Arabs say: "God has a hundred names, but man knows only ninety-nine of them. The camel knows the hundreth, and that is why he always looks so haughty and supercilious." When you see "chewing the cud," as "repeating the hundreth name of God," you have caught a bit of the romance of the East, and it satisfies, somehow.

A diminutive goat-herd of Kashmir.

Up in Murree there are the cows and goats to contend with. It would be hard to find more athletic animals. Scrambling up and down the mountain paths, clinging to the cliffs with their forefeet, racing pell-mell down the mall, these agile creatures seem to be everywhere at once. But elusive as they are, they cannot escape the diminutive goat-herds who round them up so they can be milked. You marvel, though, how the people manage to get a drop out of them. At dinner time you thoughtfully chew your meat —no wonder it is so tough! You have slain another ghost—a vision of sleek fat cows grazing lazily in fresh green pastures, getting ready to become two-inch steaks. Those days are gone forever.

Cats and dogs are next. You soon learn that all cats are robbers and the only good cat is a drowned cat. He is worth four "annas" (about eight cents) in our house, usually spent for "jellabies," those nice Indian sweets, shaped like pretzels. In the same way most of the bazaar dogs are poor old mangy beasts, fit only for strychnine sandwiches to help them out of their misery.

There is a reason, of course. The Hindus will never kill an animal, because he might harbor an ancestor or a relative who has died. Transmigration of the soul is part and parcel of the Hindu system. But by the same token the animals are never fed either. The result is that while they are young, cats and dogs are a nuisance, and when they are old, they are better off dead. Gradually western influence is raising the dog to the status of a household

Arabs say the camel knows the "hundredth name of God," and that is why he always looks so haughty and supercilious!

pet, but cats are still very much on the "out."

As far as pork and beef are concerned, Mussulmans and Hindus are like Jack Spratt and his wife. The M's can eat no pork, and the H's can eat no beef. In fact, strict Hindus eat no meat whatsoever, but no matter how lax they have become, to eat beef is always a disgrace and practically unheard of. It is to them like cannibalism would be to us. The cow, you see, is a holy animal and must on no account ever be waylaid, let alone slaughtered. In Kashmir, where the Rajah is a strict Hindu, it is forbidden to import beef, even for the English. The Mussulmans are not vegetarians, but they eat no pork for exactly the opposite reason. Pork meat is unclean, forbidden by the Prophet. The result is that chops and bacon are at a premium, and ham is almost unobtainable.

This has become a very materialistic and prosaic treatis! What about the snakes and tigers and monkeys and elephants — thrills, dangers, adventures, romance? Surely any armchair traveller could write a better article than this! But it is too bad—those things just do not seem to come our way. We are too far north for one thing, and too citified for another. The nearest "kin" we can claim to the tigers and panthers are the Murree jackals, and they are more scared of us than we are of them. At night you sometimes see a pair of phosphorescent green eyes shining out at you from a thicket, but the minute you say "Boo!"—there is a flurry in the dry leaves and master "hero-jackal" runs for cover. A good-sized rat would have more spunk!

Traveling down from Delhi or Patna you meet plenty of monkeys. They chatter down at you from the roofs of the railway stations, sneak into the compartments to steal the food, and act more like street urchins than like jungle creatures. Elephants also we know only from afar off. Our sisters in Dacca can tell you plenty about them though, but the Punjab seems to be the wrong place for those pachyderms. Snakes we do have—more than we want! Every empty building, deserted garden, and crumbling ruin is full of them. Once in a while our boys kill one in the compound, and then there is a great "to-do." They are always said to be poisonous, but I have my doubts. Snake-bites are pretty rare in the dispensary—but perhaps the victims do not live long enough to come for treatment.

There are many factors which help the strange to become familiar. Proximity, understanding, interest, and a cheerful determination are the best of them. The quickest way to feel at home in an adopted country is to give up the old and accept the new wholeheartedly. This does not deny or ignore the unquestionable room for improvement. India is a land of wide open spaces, and the sky is the limit. But it is a wise precaution to wait a while and study a bit—first of all. There is so much to learn! A lifetime is not half long enough to assimilate it all! Goodwill and good-sense—these are the first requirements of a useful missionary.

In Our Library

MARCH INTO TOMORROW, by Reverend John J. Considine, M. M. Field Afar Press, New York. 1942, 87 pp., $2.00.

Those of us who were captivated by Daniel Sargent's story of Bishop Walsh and Maryknoll will welcome Father Considine's latest panoramic view of the missionary society in China — "March Into Tomorrow." Beginning where Daniel Sargent concluded, the book carries you into the individual mission fields as they stand today in the "field afar." More than the history and the principal events of each place is brought out. The book has a deeper spiritual significance to portray — the missionary's optimistic vision of the future. In the last chapter of the book, entitled "Tomorrow," this is beautifully summed up in a prayer by Bishop Ford:

"Grant us, Lord, to be the doorstep by which the multitudes may come to worship Thee. And if, in the saving of their souls, we are ground under foot and spat upon and worn out, we shall have served Thee in some small way, and we shall have become the King's Highway to pathless China."

* * *

IN THE STEPS OF DANTE AND OTHER PAPERS, by I. J. Semper. Loras College Press, Dubuque, Iowa, 1941. Cloth bound, 160 pp., $1.25.

In this series of essays Mr. I. J. Semper, who is the head of the English department at Loras College, touches upon a variety of subjects—travel, history, literature and biography. If you are addicted to "arm-chair traveling" you will enjoy his descriptions of the Italian cities and places of interest which are inseparably linked with memories of the great Italian poet, Dante. But his essays far exceed the worth of mere travelogues. They are considerably enhanced by anecdotes of biographical and historical interest which make, what might otherwise be called mere description, really alive for the reader.

If you prefer browsing about in classic manuscripts to "arm-chair travel," then the author's essays on Shakespeare and the early English poets will appeal to you. Among other things, Mr. Semper points out the similarity of the "philosophy of war" as portrayed in some of Shakespeare's characters to the philosophy of militant aggression all too prevalent today—just another proof that a few more hundred years of suffering and bloodshed have not yet taught man the lesson of peace.

This is a book that will delight many. Not only does it afford the reader some varied and very pleasant subject matter, but there is a goodly amount of solid information tucked away in its pages.

(Continued from page 117)

honored as a poet, physician, philosopher, and prophet. She never attended the lectures at Salerno, but she must have had copies of the medical textbooks they used there. Her own medical books have come to be accepted as the most important Latin scientific contribution of the period. Despite her crude beliefs as to the primary causes of disease, Hildegard had a practical knowledge of most of the four hundred and eighty-five plants and drugs which she considered useful for treatment. These, she prescribed, should be taken in small doses with enormous quantities of water, which was to be boiled if taken from the swamps. She advocated sleep, exercise and diet in good proportions for her patients. In those days, when fevers were seldom differentiated, quotidian, tertian, and quartan were known to St. Hildegard. For these she prescribed a concoction from the bark of the medlar tree which she must have imported from the south. To her students, who flocked to her convent in great numbers, she insisted on thoroughness in diagnosis and accuracy in observing symptoms and recording them. To the sick she was always kind and gentle, encouraging them to trust in God and using her own psychological insight in their treatment.

While Italy and the Rhineland could thus boast of their share of famous medical women, France was not at all behind the times. In Paris alone, in the year 1292, there were no less than eight "miresses" or "physiciennes." So important and influential were they, that the University of Paris devoted one whole article of its list of regulations to the activities of women surgeons. Nor do the doctors, nurses and "aides" of today, who volunteer for military service, have anything on a certain French woman of the Middle Ages. This enterprising lady, whose name, by the way, was Hersend, accompanied St. Louis, King of France, on his military expedition to the Holy Land. No doubt many a town-crier sat up and took notice when "Medicienne Hersend" stepped upon His Majesty's full-rigged galley to set sail for Jerusalem as personal physician to the King! She not only survived the campaign but later on returned to Paris to resume her practice and to enjoy a life-long pension of twelve Parisian denares. Medical practice for women was a career quite in keeping with the spirit of the Middle Ages!

But, sad to say, this era of enlightenment and the freedom with which women participated in the intellectual life of the period was not to last. The secularization of the universities, the gradual decay of the true Christian spirit, and the neo-paganism of the Renaissance effected a change in the position of the educated woman. Weakened on every side by mercantalism, vanity, competitive striving and egoism, the high moral and social standards of the woman physician were soon forgotten. All sorts of reasons were established to justify the exclusion of women from the medical profession. Several centuries were to intervene before woman would again come into her own.

(to be continued)

The Mission Clipper

The number of registered nurses in India is approximated to be about 5,000 against a total of 40,000 registered doctors. One of the reasons why more hospitals in India do not train nurses is the shortage of an adequately qualified administrative and teaching staff. Rapid progress can only be made if facilities for post-graduate study are provided for nurses who have shown special ability and aptitude for administrative or teaching posts.—Indian Medical Gazette

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The Medical Missionary Auxiliary of the Church Missionary Society, the largest medical organization of this kind in the world, is celebrating its jubilee this year. In large areas of Africa and the East its hospitals, clinics and welfare centers are doing work which equals that of the twelve great voluntary hospitals of London. But the beginning of its missions dates back much longer than fifty years. The Church Missionary Society sent its first physician to the Maoris of New Zealand in 1863. Another landmark was its establishment in Kashmir in 1865. From this small beginning came a chain of hospitals along the Northwestern Frontier which have been centers of peace and good will among the tribes people. From its earliest stages the mission hospital has been a great reconciling agency. Time has shown that foes of long standing forget their feuds and live at peace within the hospital walls. Today the large mission hospital at Hangchow is carrying on its work among Chinese soldiers and refugees with the full consent of Japanese officials and is equally ready to treat Japanese patients. Medical missionaries look forward to the future and are giving more attention to preventive medicine and the raising of the general level of health by the teaching of hygiene and the spread of clinics.

When all American missioners in Korea were required to accept repatriation, only one Maryknoll sister, who is a native Korean, was able to stay with the native community. She remains in charge, according to arrangements made by the Vicar Apostolic of Seoul, to whose jurisdiction the former Maryknoll Vicariate of Heijo has been transferred. The native novitiate has been transferred to Saiho, the former principal center of the Maryknoll Fathers. The professed sisters in groups of two and three are stationed in the houses formerly conducted by Maryknoll sisters, where they will carry on the work as best they can. Coincident with the importance of the native novitiate, as demonstrated in this crisis, is the providentially fortunate presence of even a very limited number of Orientals within the Maryknoll Sisters' community itself, each of whom is now able to fill a strategic post, such as that of the Korean, Sister Mary Agneta Chang, who out of her more mature experience can direct the infant native community. — Courtesy of the Maryknoll Sisters.

We are all called to be, in the phrase of St. Paul, "the co-workers of God." Each according to his strength and opportunities—but all really co-workers. For there is no place for idlers in the Vineyard of the Lord, and on the Living Vine, no place for dead branches. The "Apostolic Age" is here again... and it is very necessary that we should all be Apostles."—J. C. Murray, S.J., in "Jesuit Missions."

The June, 1942 issue of the Fu Jen Magazine carried the following story of the suppression of the opium peril in China, according to the six-year plan inaugurated by Generalissimo Chiang Kai-shek in 1935:

"This plan provided for the gradual prohibition of the cultivation, transportation, sale and smoking of opium. In costal and central China cultivation of opium was absolutely prohibited. In the interior provinces the acreage of poppy plantation was to be gradually reduced so that by the end of 1940, the last year of the six-year plan, opium cultivation would become extinct. The law prohibited absolutely the smoking of opium by members of the Kuomintang Party of the Government, of the military forces and of schools and colleges. To each smoker (who because of age or illness could not break the habit) a card would be issued permitting the holder to purchase a specified amount of opium and prescribing a time limit for him to break the habit. The number of retail stores selling opium were to be limited and to be reduced year by year.

Into opium plantations various kinds of cereal or food crops were introduced to replace poppy. Farmers found it more profitable to cultivate these crops than opium, especially since the outbreak of hostilities . . . By the end of 1939, poppy plantation was reduced from over three million mow (one acre equals 4.6 mow), to thirteen thousand mow and opium addicts from over four million to about one million. In 1940, with stronger government pressure, the suppression of opium was accelerated, and although figures are not yet complete it is very probable that cultivation of opium has been largely extirpated and the number of addicts further reduced.

Jottings . . .

Women patients—convalescing at Holy Family Hospital

Soon after she arrived in India, a few months ago, Sister Dolores took a "course" from Sister Alma Julia—how to ride a bicycle in three easy lessons! From her letters we gather that she has "learned"—but not without a few mishaps! She writes:

"The other Sunday morning Sister Alma Julia invited me to go out bicycling with her to hear a second Mass. Now Sister was not so much interested in my spiritual welfare. She was merely trying to do some 'follow-up' work on her pupil. After all, it is due mainly to her persistent efforts and exhortations that I can ride at all! She likes to take me out for practice, particularly on Sunday mornings, since then there is not much traffic and you are not so liable to have a head-on collision with all the buffaloes, ox-carts, camels, donkeys, army trucks, and so forth that crowd the road.

"Well, anyway, on this particular morning, despite the lack of traffic, I did have a collision. I ran right smack into a small boy who was playing on the road-side. Of course I took him home with me and administered 'first aid' at the hospital. A few weeks later, when we were taking a short walk, who came up and 'salaamed' most graciously but the very youngster I had struck! I never would have thought it possible to make friends with people by knocking them down. Personally, I think the bright red mercurochrome I used to paint him up with went a long way towards creating a favorable impression!"

But Sister has learned about much more than "cycling." She continues with:

"For the past ten days I have been on special duty with a young Mohammedan mother. We understood but little of each other's language, but for the most part we managed with nods, signs and so forth. Whenever a complete passe was reached, I would go out and ask one of the Patna Sisters to interpret for me—as, for instance, when they pointed to a picture of St. Anthony which hung on the wall and asked me to explain who that man was. Nods and signs would never have sufficed in that case!

"Both mother and daughter were simply delighted at my attempts to speak to them in their own language. I used to read off words from my notebook. If they understood they would laugh and shake their heads in affirmation. Then I knew my pronunciation was all right. But if they looked puzzled I put an X after the word for future reference. Almost without exception all the patients are just as friendly and eager to help.

"One morning an old woman came to the dispensary to see 'Dr. Sahib.' Anyone could see that she was really in pain. But more than that she was just plain scared. When she was told that she had to have an operation she left and did not come back for quite a long time. However the pain forced her to return, and she consented to the operation. Considering how badly frightened she was, it was quite heroic of her to say 'yes.' Certainly her relatives were no help to her with their sad and worried faces.

"At any rate, her troubles are all over now. After two weeks of an u n e v e n t f u l post-operative course, she returned home very happy. Her bill was thirty-one rupees (about ten dollars in our money). This paid for everything —hypos, a major operation, and fifteen days in the hospital. Many patients are too poor to pay anything, but this woman's husband wanted to give something. It was his way of expressing his gratitude.

"But J o s n a (This was the woman's name.) received much more than just a cure as the result of her operation. Now she has ever so much more prestige! No one else in the village ever had

From Abroad . . .

such a large tumor removed. She has witnesses to testify to it! All the relatives had to parade through the operating room to view it, and as her thirteen-year old son lived in another city, it had to be kept on display until he arrived! One woman actually asked to see the patient—she could not believe the woman was still living! Incidentally, 'Dr. Sahib's' prestige increased also.

"Sometimes I just stand about and listen to the funny things that go on here. The other day I heard this in English:

'Sister, the men may come between six and eight?'

'Yes, the men may come between six and eight.'

'Then I can come to see my wife tomorrow at six?'

'Yes.'

'Then it will be in vain if I come before six?'

'Yes, it will be in vain!'

'Thank you'."

* * *

Sister Vincent has just been transferred from Dacca to Rawalpindi. She wrote to us almost as soon as she arrived:

"The journey from Dacca was dreadful, especially from Calcutta onward. The trains were crowded with evacuess from Burma, who certainly looked pathetic.

Before I left Dacca we had fifty male nurses in training for home nursing and first aid. I took them for first aid for two hours every day, and honestly, it was just like a variety show. They knew absolutely nothing when they came, but after a few weeks they showed signs of turning out to be quite good 'first aiders,' even if they do not make good nurses. We held our classes under the trees, as there was no room large enough to hold us all. No doubt it was much better for them that way. They are going to get all the casualties outside anyway. Our only equipment consisted of sixteen triangular bandages and a stretcher. But I broke up two boxes and by nailing pieces together managed to manufacture a set of improvised splints. They served the purpose just as well, and besides, they were better suited. 'First aiders' must learn to improvise anyway!

"Sister Margaret Mary had the hardest time getting off to Lahore the other day—all on account of the air raid warnings. She wanted to go on the 10:30 a.m. train, but the warning went off at 11:00 and did not sound the 'all clear' until 10:30. The next train left at 9:15 p.m. She had just left the compound at 8:15 to be sure to get there in time, when the warning went off again! So home she came to wait until the 11:30 p.m. train. Nothing happened the third time—so she managed to get off safely to Lahore after all."

* * *

While she was vacationing up in Murree, Sister Pauline sent us a bit of the "Patna news." She writes:

"They are very busy in Patna with forty-one in-patients and some of the nurses on holiday! So many are very, very sick, that they require a lot of care. In a letter yesterday Sister Laetitia said that a baby had been admitted with a temperature of 108.4!—and immediately after that they had two major operations.

"Our 'nurses-in-training' are learning very quickly and give us a great deal of help. We certainly can use it!

"The other day I saw a new style for wearing eye-glasses! A woman had the curved part of the glasses put through a hole in the upper lobe of each ear, where she had formerly worn a large ring earring. We have an old lady here who comes to the dispensary frequently. She had a cataract operation on one eye, so she needed an eye-glass for it. As the other eye does not require one, she wears an eye-glass frame with a glass in just one side! How is that for ingenuity in 'eye-glass fashions'!"

R. I. P.

Please pray for the repose of the souls of:

Sister M. Rosarie, Holy Cross, Ind.

Sister M. Thecla, Baden, Pa.

Mr. Ellwood Bowman, Pottstown, Pa.

Mrs. Ellen Hodgsen, Chester, Pa.

May their souls and all the souls of the faithful departed rest in peace. Amen.

Sister Therese and Sister Laetitia "launch out" on a sick call—via the Ganges.

When autumn came and the leaves began to fall
At Holy Family Farm in Galilee,
Joseph and Mary decided to have—
What they always called their "raking bee."

So they set out with baskets and rakes—
Jesus and Mary and Joseph—all three.
In a joyous spirit their work was done—for they worked
Together—as a family.

Now the "family spirit" is what we need,
To build our hospital.
On your willing hearts and your willing hands
We must depend for the wherewithal.

So with the sick won't you please share
In a "family spirit" of giving?
Whatever you give—be it large or small—
It will always count—for that's living
In a "family spirit" with Christ!

Join us now—in a "spirit of giving"
With your dollars, dimes and pennies
To help us build a new 100 bed hospital for Pindi!

Mother Anna Dengel
8400 Pine Road
Fox Chase, Philadelphia, Pa.

Dear Mother Dengel:

I am delighted to join in your hospital campaign.
Enclosed please find $.....
to buy bricks for Pindi.

Very sincerely,

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